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ABSTRACT (MAX. 280 WORDS)							

A pupil information and attitudes inventory has been prepared for administration in grades four through twelve. The questionnaire is divided into three sections: information, attitudes, and general questions. The student checks the appropriate "yes" or "no" box in response to each question. At the end of each section is a box to record the total number of "yes" and "no" answers. On a separate sheet, the student fills in pertinent information about himself, including his age, birthplace, birthdate, address and telephone number. A summary sheet is included for teachers to record the total information gained from each class. Teachers are encouraged to write comments related to the ease of difficulty with which the questionnaire was administered.

Some of the questions are: "Do you usually drink milk everyday?", "Do your parents like your school?", "Do the rules of this school make sense to you?", and "Do you think most of your teachers care if you learn?"

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HARVARD GRADUATE SCHOOL OF EDUCATION
CENTER FOR RESEARCH & DEVELOPMENT
CAMBRIDGE, MASSACHUSETTS 02138

Great Cities School Improvement Program

PUPIL INFORMATION AND ATTITUDES INVENTORY

Form A

Grades 4 through 12

Detroit Public Schools

May 3, 1961

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PART I - INFORMATION

	YES	NO
1. Do you usually drink milk every day?		
2. Have you ever read a whole book (not a comic book) at home, just for fun?		
3. Have you a regular job or duties you do at home?		
4. Do you usually go to bed before 10 o'clock?		
5. Do you eat breakfast every day?		
6. Do you sometimes enjoy sitting alone reading a book?		
7. Have you ever received a book as a present?		
8. Do you have a job earning money away from home?		
9. Have you ever been in a hospital as a patient?		
10. Have you ever been treated by a doctor?		
11. Have you ever been treated by a dentist?		
12. Have you ever been downtown?		
13. Do you usually pick out (choose) your own clothes?		
14. Do you read the daily newspaper?		
Totals		

YES NO O'S

--	--	--

3.

	YES	NO
1. Do your parents usually look at your report card when you bring it home?..		
2. Do your parents like your school?		
3. Do your parents try to help you with your school work?		
4. Do your parents want you to graduate from high school?		
5. Have your parents ever talked to you about what you should do for a living?		
6. Do you plan on going to college?		
7. Do your parents give you a regular allowance?		
8. Do you sometimes go places or do things at home for enjoyment with your parents?		
Totals		

YES NO O'S

--	--	--

C.

	YES	NO
1. Are you sometimes complimented (praised) for doing your work well?		
2. Do your teachers usually explain to you why you received a certain mark on your lesson or on your homework?		
3. Do movies, phonograph records, and filmstrips help you learn?		
4. Would you learn more if your teachers used more movies?		
5. Do most of your teachers ever put pupils' work on the bulletin board? . .		
6. Do your teachers often help you understand the textbooks better?		
7. Do you usually get enough help from your teachers when your grades are low?		
8. Have you ever had a special job to do in the school?		

1. (cont'd)

9. Do your teachers ever talk to you about your personal appearance and neatness?
10. Do any of your teachers speak in such a manner that you cannot understand them?

YES	NO

YES	NO	O's

Totals

2.

1. Do you think the principal would help you if you were in trouble in this school?
2. Would you feel free to talk to the counselors or assistant principal about a personal problem?
3. Do you believe the books you use in school are usually interesting?
4. Are you able to read the books you are given in school?
5. Does the counselor or the assistant principal have time to see you when you need help?
6. Do the rules of this school make sense to you?
7. Would you like one period in school each day for nothing but study?
8. Are you allowed to take books home for extra study?
9. Does homework help you learn more?
10. Are you doing the very best you can in school?

YES	NO

YES	NO	O's

Totals

PART II - ATTITUDES

A.

- 1. Do your parents usually ask you what you do in school?.....
- 2. Would you like to have your parents meet most of your teachers?.....
- 3. When things bother you, do you talk them over with your parents?.....
- 4. Would it help you if your parents knew what you were studying in school?..

YES	NO

YES	NO	O's

Totals

B.

- 1. Do you think that most of your teachers understand your problems?.....
- 2. Do most of your teachers explain the work so that you can understand it?..
- 3. Do you think that most of your teachers want to hear both sides of a story before they decide?.....
- 4. Do you like most of your teachers?.....
- 5. Do you like any of your teachers a great deal?.....
- 6. Do you think most of your teachers can take a joke?.....
- 7. Do you ever ask your teacher for help or advice?.....
- 8. Do you think most of your teachers care if you learn?.....
- 9. Do you usually do what your teacher says the first time you are told? ..
- 10. Would you like to have your work on the bulletin board once in a while? ..

YES	NO

YES	NO	O's

Totals

	YES	NO
1. Do you like school?		
2. Do you feel that you will be happier when you grow up if you finish high school?		
3. Have you found most students in this school friendly?		
4. Are good students usually the most popular ones in your room?		
5. Has this school helped you to get along well with people?		
6. Is this school helping you to speak and write good English?		
7. Do you like spelling (Language Arts, English)?		
8. Do you like arithmetic?		
9. Do you like science?		
10. Are you a good student?		
11. Do you like social studies?		
12. Do you like reading?		
13. Do you find books in the library which you enjoy reading?		
14. Do you like auditorium?		
15. Do you like gym?		
Totals		

D.

- 1. Do you think there are enough ways to enjoy yourself in the neighborhood?.
- 2. Do you believe the adults are doing the best they can to make this a nice neighborhood?
- 3. Do you think it is important to have grass (a lawn) in front of your house?
- 4. Do you feel that children in this neighborhood get along well?
- 5. Does this school help the neighborhood to be better?
- 6. Is the public library a pleasant place to go?

YES	NO

Totals

YES	NO	O's

PART III - GENERAL QUESTIONS

1. If you had two wishes, what would they be?

1. _____

2. _____

2. What do you hope to be when you grow up? _____

3. In what city or state would you like to live when you grow up? _____

4. Do you have any pets at home? YES _____ NO _____. Please list them. _____

5. If you belong to a club in or outside of school, name it. _____

6. What things do you do together as a family that you enjoy? _____

7. What language does your family speak at home? _____

8. Who is the kindest person you have ever known? _____

9. Who is the hardest working person you have ever known? _____

10. a. Who is the smartest grown-up you know? _____

b. What job does this person have? _____

11. What part of the daily newspaper do you usually read? _____

12. What do your parents like about your school? _____

13. What is your favorite Television program? _____

14. What is your favorite way to spend time at home? _____

Great Cities School Improvement Program
Pupil Information and Attitudes Questionnaire

Last name	First name	Grade
Name of School	Month Day Year (Date of Birth)	Age
Place of Birth	City or Town	State
Today's Date	Month Day Year	
Present Address	Number Street () Zone	
Telephone Number		

SUMMARY SHEET

To the Teacher:

Please fill in all appropriate information on this sheet. Submit this completed sheet to your department head or school office as soon as possible after your pupils have finished answering the questionnaires. Thank you very much for all your help and co-operation.

Date _____

Teacher's Name _____

School _____

Grade _____

SUMMARY OF RESPONSES: (To be completed by the teacher)

PART I	YES	NO	ZERO
A			
B			
C			
D			
TOTAL			

PART II	YES	NO	ZERO
A			
B			
C			
D			
TOTAL			

GRAND TOTAL:	YES	NO	ZERO
PART I			
PART II			
GRAND TOTAL:			

Note: Teachers are encouraged to write, below and on reverse, comments related to ease or difficulty of administration of this questionnaire.